Case 22-17381-KCF Doc 148 Filed 06/28/23 Entered 06/28/23 14:36 EDesc Main Document Page 1 of 10 JEANNE A. NAUGHTON, CLERK

Fill in this information to identify your case:				
Debtor 1	Michael Pat	rick Siano		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States Case number	Bankruptcy Court f 22-17381 (If known)	or the: District of New Jersey		

JUN 28 2023

U.S. BANKRUPTCY COURT
TRENTON, MJ

BY

DEPUTY

Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1F Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>173,171,815.75</u>
1c. Copy line 63, Total of all property on Schedule A/B	170 171 015 75
	\$ <u>173,171,815.75</u>
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	·
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$12,304.40
Your total liabilities	\$12304.40
Part 3: Summarize Your Income and Expenses	<del></del>
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$9140.00
5. Schedule J: Your Expenses (Official Form 106J)	¢ 1094.00
Copy your monthly expenses from line 22c of Schedule J	\$

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Debtor 1

First Name

Michael	Patrick	Siano	
MICHACI	Lauton	Giailo	

Case number ((F known) 22-17381

Pa	art 4: Answer These Questions for Administrative and Statistical Re	ecords
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	<ul> <li>No. You have nothing to report on this part of the form. Check this box and subr</li> <li>✓ Yes</li> </ul>	nit this form to the court with your other schedules.
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurre family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic	
	Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.	this part of the form. Check this box and submit
8,	From the Statement of Your Current Monthly Income: Copy your total current me Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	onthly income from Official \$
9.	. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule</i>	E/F:
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$
	<ol> <li>Obligations arising out of a separation agreement or divorce that you did not rep priority claims. (Copy line 6g.)</li> </ol>	port as
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
	9g. <b>Total.</b> Add lines 9a through 9f.	\$ <u> </u>

	1011 0000				
Fill in this information to identify y		_			
Debtor 1 Michael Patrick S	Siano Middle Name	Lasi Name			
Debtor 2					
(Spouse, if filing) First Name	Middle Name	Lest Name			
United States Bankruptcy Court for the: [	District of New Jersey				
Case number (If known) 22-17381			Check it	this is: mended filing	
<del> </del>		<u>-</u>		· •	ostpetition chapter 13
				ne as of the followin	
Official Form 106l			MM /	DD / YYYY	
Schedule I: You	ır Income				12/15
Be as complete and accurate as posupplying correct information. If you are separated and your spouseparate sheet to this form. On the	ou are married and not fi ise is not filing with you, top of any additional pa	ling jointly, and you do not include info	ır spouse is living witi Irmation about vour si	n you, include informa couse. If more space i	is needed, attach a
Fill in your employment Information.		Debtor 1	· · ·	Debtor 2 or no	n-filling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☑ Employed ☐ Not employed	ed	<ul><li>☑ Employed</li><li>☑ Not employ</li></ul>	ed
Include part-time, seasonal, or self-employed work.  Occupation may include student	Occupation	construction/d	elivery/driver	Clerical	
or homemaker, if it applies.	Employer's name	Appoic Constru	ction Development	SAMPRO	
	Employer's address	2082 Church Number Street	Rd	1825 Swarth Number Street	more Ave
		Toms River N	J 08753	Lakewood	NJ 08071
		City	State ZIP Code	City	State ZIP Code
·	How long employed th	ere? 2 years		2 years	
Part 2: Give Details Abou	t Monthly Income				
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	f the date you file this fo	yer, combine the info			
			For Debtor 1	For Debtor 2 or non-filing spou	
List monthly gross wages, sa deductions). If not paid monthly	lary, and commissions (I , calculate what the month	before all payroll nly wage would be.	2 \$ 4000.00	· ·	00
3. Estimate and list monthly ove	rtime pay.		3. +\$ 800.00	. · <u>*</u>	<u>-</u>
4. Calculate gross income. Add	line 2 + line 3.		4. \$4800.00	\$ 2000.0	00

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Debtor 1

Official Form 106I

Michael	Patrick	Siano
Michael	raulck	Sidilo

st Name Middle Name Last Na

Case number (# known) 22-17381

page 2

		Fo	r Debtor 1			btor 2 or Ing spous	<u> </u>			
Copy line 4 here	4.	\$_	4800.00		\$	2200.0	00			
5. List all payroll deductions:										
5a. Tax, Medicare, and Social Security deductions	5a.	\$.			\$	155.0	00			
5b. Mandatory contributions for retirement plans	5b.				\$					
5c. Voluntary contributions for retirement plans	5c.	\$_			\$					
5d. Required repayments of retirement fund loans	5d.	\$_			\$					ļ
5e. Insurance	5e.	\$_			\$		_			Ī
5f. Domestic support obligations	5f.	\$_			\$					
5g. Union dues	5g.	\$_	105		\$					
5h. Other deductions. Specify:	5h.	+\$		4	<b>-</b> \$					
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$			\$					
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4695.00		\$	2045.	00			
8. List all other income regularly received:										
8a. Net income from rental property and from operating a business, profession, or farm										
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_			\$					
8b. Interest and dividends	8b.	\$_	<u>-</u>		\$					
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent									
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_			\$	400.	00			
8d. Unemployment compensation	8d.	\$_			\$					
8e. Social Security	8 <b>e</b> .	\$_			\$					
6f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$_			\$	_				
8g. Pension or retirement income	8g.	\$_			\$					
8h, Other monthly income. Specify:	8h.	+ \$_			+\$					
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_			\$			ļ		
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$_	4695.00	+	\$	2445.	00_	= \$		9140.00
11. State all other regular contributions to the expenses that you list in Sche										
Include contributions from an unmarried partner, members of your household, friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are							le J.			ı
Specify:							11.	+ \$	í	
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain	e resu	t is th				me.	12.	\$	i	9140.00
			,	,,,					ombli	ned ly income
13. Do you expect an increase or decrease within the year after you file this No.										
✓ No.  Will be going back to my regular career at IBT	unio	n lo	cal 469 at a	n ho	urly i	rate of \$4	48.00	) an	d ho	ur

Schedule I: Your Income

Fill in this information to identify your case:			
Debtor 1 Michael Patrick Siano First Name Middle Name Last Name	Check if th	is is:	
Debtor 2	<b>2</b> An amo	ended filing	
(Spouse, if filing) First Name Middle Name Last Name	☐ A supp	lement showing post	
United States Bankruptcy Court for the: District of New Jersey	expens	es as of the following	ı date:
Case number 22-17381 (If known)	MM / D	D/ YYYY	
Official Form 106J	<del></del>		
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fi information. If more space is needed, attach another sheet to this for (If known). Answer every question.	ling together, both are equally m. On the top of any additional	responsible for supply pages, write your nam	Ing correct e and case number
Part 1: Describe Your Household			
1. Is this a joint case?			
<ul><li>✓ No. Go to line 2.</li><li>✓ Yes. Does Debtor 2 live in a separate household?</li></ul>			
□ No			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?		Dependent's age	Does dependent live with you?
Debtor 2. each dependent  Do not state the dependents'	Daughter	13	□ No
names.			Yes
	Son	8	☑ Yes
			□ No
		<u> </u>	☐ Yes
	,		□ No □ Yes
			□ No
			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you expenses as of a date after the bankruptcy is filed. If this is a suppler applicable date.  Include expenses paid for with non-cash government assistance if your part of the property of	mental <i>Schedule J</i> , check the b	ement in a Chapter 13 ox at the top of the for	case to report m and fill in the
such assistance and have included it on Schedule I: Your Income (O		Your expe	enses
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	de first mortgage payments and	4. \$	
If not included in line 4:			
4a. Real estate taxes		4a. \$	
4b. Property, homeowner's, or renter's insurance		4b. \$	100.00
4c. Home maintenance, repair, and upkeep expenses		4c. \$	100,00
4d. Homeowner's association or condominium dues 4d. \$			

Debtor 1

### Michael Patrick Siano

First Name Middle Name

Last Name

Case number (if known) 22-17381

			4	
:		_	Your expenses	
5. <b>A</b>	dditional mortgage payments for your residence, such as home equity loans	5.	\$	
6 U	Itilities:			
	a. Electricity, heat, natural gas	6a.	\$	90.00
	b. Water, sewer, garbage collection	6b.	\$	54.00
. 6	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
e	d. Other Specify:	6d.	\$	
7. F	ood and housekeeping supplies	7.	\$	300.00
	Childcare and children's education costs	8.	\$	
9. (	Clothing, laundry, and dry cleaning	9.	\$	100.00
	Personal care products and services	10.	\$	30.00
•	Medical and dental expenses	11.	\$	
12. 1	ransportation. Include gas, maintenance, bus or train fare. On not include car payments.	12.	\$	100.00
13. i	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
	Charitable contributions and religious donations	14.	\$	
	nsurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	<del> </del>
	15b. Health insurance	15b.	\$	
1	15c. Vehicle insurance	15c.	\$	200.00
	15d. Other insurance. Specify:	15d.	\$	
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	
17. l	nstallment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	<u> </u>
	17d. Other. Specify:	17d.	\$	
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 1981).	18.	\$	
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	_
	20c. Property, homeowner's, or renter's insurance	20c.	\$	<del></del>
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e.	\$	<del></del>

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Debtor 1		Case number ((Fknown) 22-	17381
First Name	Middle Name Last Name		
	and the second s		
21. Other. Specify:		21.	+\$
22. Calculate your mor	ithly expenses.		
22a. Add lines 4 thro	ough 21.	<b>22</b> a,	\$1094.00
22b. Copy line 22 (n	nonthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22c. Add line 22a ar	d 22b. The result is your monthly expenses.	22c.	\$1094.00
23. Calculate your mon	thly net income.		¢ 9140.00
23a. Copy line 12 ()	our combined monthly income) from Schedule I.	23a.	\$
23b. Copy your mor	athly expenses from line 22c above.	23b.	<b>-</b> \$1094.00
23c. Subtract your	nonthly expenses from your monthly income.		\$ 8,046.00
The result is yo	our monthly net income.	<b>23c</b> .	5
		·	
24. Do you expect an ir	crease or decrease in your expenses within the year after you	ı file this form?	
	expect to finish paying for your car loan within the year or do you e increase or decrease because of a modification to the terms of yo		
☐ No.			
Yes. Explain	nere: I am currently trying to modify my mortgage, if I re \$2132.25 a month. Which would bring my total ex and I net income would decrease to \$5,913.75.	eceive final approval xpenses a month to s	the payment will be \$3,226.25 and my fiancé
1			}

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Debtor 1	Michael Patric	Michael Patrick Siano		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
		r the: District of New Jerse	y	
Case number	22-17381			

Check if this is an amended filing

### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
✓ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	e summary and schedules filed with this declaration and
that they are thue and correct.	
* Michael Patrick Sione	<b>x</b>
Signature of Debtor 1	Signature of Debtor 2
Date 06/26/2023	P. C.
Date MM / DD / YYYY	Date MM / DD / YYYY

To: USBC Clerks office 402 East State Street Trenton Nj, 08608

#### **IN RE: AMENDED SCHELDULES**

Dear Clerks Office,

Enclosed you will find my amended Schedules, there is also a copy of each schedule I would like mailed back to me via enclosed prepaid envelope for my records. Can you please stamp my copy of the schedules received and place them into the prepaid envelope to be mailed to me for my records.

Thank you for your time Sincerely, <u>Michael Patrick Siano</u> 102 Haines Street East Lanoka Harbor, NJ, 08734

